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APPLICANTS

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** CONTINUING DATA *****

NONE JAF

** FOREIGN APPLICATIONS *****

NONE JAF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KS	SHEETS DRAWING 4	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>SMR</i> Examiner's Signature Initials				

ADDRESS

27431
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TITLE

Unidirectional, multi-head fiber placement

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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